**TABLE OF CHANGES – FORM**

**Form I-751, Petition to Remove Conditions on Residence**

**OMB Number: 1615-0038**

**07/30/2015**

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| **Reason for Revision:** Standard language updates. Updates from the program and Office of Chief Counsel. |

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| **Current Section and Page Number** | **Current Text** | **Proposed Text** |
| **Page 1,** **To be completed by an attorney or accredited representative (if any).** | **To be completed by an attorney or accredited representative (if any).**Check the box if Form G-28 is attached to represent the petitionerAttorney State License Number:  | **[Page 1]****To be completed by an attorney or accredited representative** (if any)**.****Select this box if Form G-28 is attached.****Attorney State Bar Number** (if applicable)**Attorney or Accredited Representative USCIS ELIS Account Number**  (if any) |
| **Pages 1-2,** **Part 1. Information About You, the Conditional Resident** | **Part 1. Information About You, the Conditional Resident****1.a.** Family Name *(Last Name)***1.b.** Given Name *(First Name)***1.c.** Middle Name***Other Names Used*** *(including maiden name)***2.a.** Family Name *(Last Name)***2.b.** Given Name *(First Name)***2.c.** Middle Name**3.a.** Family Name *(Last Name)***3.b.** Given Name *(First Name)***3.c.** Middle Name***Other Information*****4.** Date of Birth *(mm/dd/yyyy)***5.** Country of Birth**6.** Country of Citizenship**7.** Alien Registration Number *(A-Number)***8.** U.S. Social Security Number *(if any)****Contact Information*****9.** Daytime Phone Number**10.** E-Mail Address *(if any)****Marital Status*****11.** Marital Status Married/Single/Divorced/Widowed**12.** Date of Marriage *(mm/dd/yyyy)***13.** Place of Marriage**14.** If the marriage through which you gained conditional residence has ended, give the date it ended *(date of divorce or date of death) (mm/dd/yyyy)***15.** Conditional Residence Expires On *(mm/dd/yyyy)***[Page 2]** ***Mailing Address*** *(If different than Physical Address)***17.a.** In Care Of Name**17.b.** Street Number and Name**17.c.** Apt. Ste. Flr. [ ]**17.d.** City or Town**17.e.** State**17.f.** Zip Code***Physical Address*** **16.a.** In Care Of Name**16.b.** Street Number and Name**16.c.** Apt. Ste. Flr. [ ]**16.d.** City or Town**16.e.** State**16.f.** Zip Code***Additional Information About You*****18.** Are you in removal, deportation, or rescission proceedings? **19.** Was a fee paid to anyone other than an attorney in connection with this petition? **20.** Have you ever been arrested, detained, charged, indicted, fined, or imprisoned for breaking or violating any law or ordinance (excluding traffic regulations), or committed any crime which you were not arrested in the United States or abroad? **21.** If you are married, is this a different marriage than the one through which conditional residence status was obtained? **22.** Have you resided at any other address since you became a permanent resident? *(If “Yes,” attach a list of all addresses and dates.)* **23.** Is your spouse or parent’s spouse currently serving with or employed by the U.S. Government and serving outside the United States? If you answered "Yes" to **Item Number 20.**, provide a detailed explanation on a separate sheet of paper and refer to the section entitled "**What Initial Evidence Is Required?**" to determine what criminal history document to include with your petition.  | **[Page 1]****START HERE - Type or print in black ink.** **Part 1. Information About You, the Conditional Resident**[No change]***Other Names Used***List all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 11. Additional Information**.2.a.Family Name (Last Name)2.b.Given Name (First Name)2.c.Middle Name3.a.Family Name (Last Name)3.b.Given Name (First Name)3.c.Middle Name[No change]**6.** Country of Citizenship or Nationality (provide all that apply)**7.** Alien Registration Number (A-Number) (if any)**8.** U.S. Social Security Number (if any)**9.** USCIS ELIS Account Number (if any)[Deleted]***Marital Status*****10.** Marital Status Single/Married/Divorced/Widowed**11.** Date of Marriage (mm/dd/yyyy)**12.** [No change]**13.** If the marriage through which you gained conditional residence has ended, provide the date it ended (date of divorce or date of death) (mm/dd/yyyy)**14.** Conditional Residence Expires On (mm/dd/yyyy)**[Page 2]** ***Mailing Address*****15.a.** In Care Of Name**15.b.** Street Number and Name**15.c.** Apt. Ste. Flr.**15.d.** City or Town**15.e.** State**15.f.** ZIP Code16. Is your physical address different than your mailing address? Yes/NoIf you answered “Yes” to **Item Number 16**., provide your physical address below.***Physical Address*** **17.a.** In Care Of Name**17.b.** Street Number and Name**17.c.** Apt. Ste. Flr.**17.d.** City or Town**17.e.** State**17.f.** ZIP Code***Additional Information About You*****18.** Are you in removal, deportation, or rescission proceedings? **19.** Was a fee paid to anyone other than an attorney in connection with this petition? **20.** Have you ever been arrested, detained, charged, indicted, fined, or imprisoned for breaking or violating any law or ordinance (excluding traffic regulations), or committed any crime which you were not arrested in the United States or abroad? If you answered "Yes" to **Item Number 20.**, provide a detailed explanation in **Part 11. Additional Information** or on a separate sheet of paper, and refer to the **What Initial Evidence Is Required** section of the Form I-751 instructions to determine what criminal history document to include with your petition. **21.** If you are married, is this a different marriage than the one through which you gained conditional resident status? Yes/No**22.** Have you resided at any other address since you became a permanent resident? Yes/NoIf you answered “Yes” to **Item Number 22**., provide a list of all addresses where you have resided since becoming a permanent resident and the dates you resided at those locations in the space provided in **Part 11. Additional Information**.**23.** Is your spouse or parent’s spouse currently serving with or employed by the U.S. Government and serving outside the United States? Yes/No[moved this paragraph to come after Item Number 20]  |
| **New** |  | **[Page 2]****Part 2.  Biographic Information****1.**  Ethnicity (Select **only one** box)Hispanic or LatinoNot Hispanic or Latino**2.**  Race (Select **all** **applicable** boxes)WhiteAsianBlack or African AmericanAmerican Indian or Alaska NativeNative Hawaiian or Other Pacific Islander**3.**  HeightFeetInches**4.**  WeightPounds**5.**  Eye Color (Select **only one** box)BlackBlueBrownGrayGreenHazelMaroonPinkUnknown/Other**6.**  Hair Color (Select **only** **one** box)Bald (No hair)BlackBlondBrownGrayRedSandyWhiteUnknown/Other |
| **Page 2,** **Part 2. Basis for Petition** | **Part 2. Basis for Petition*****Joint Filing***My conditional residence is based on my marriage or my parent's marriage to a U.S. citizen or permanent resident, and I am filing this joint petition together with:**1.a.** My spouse**1.b.** My parent's spouse because I am unable to be included in a joint petition filed by my parent and my parent's spouse.**OR** *(check all that apply)****Waiver Request Filing***My conditional residence is based on my marriage or my parent's marriage to a U.S. citizen or permanent resident; I am unable to file a joint petition with my spouse or my parent's spouse and I request a hardship waiver because:**1.c.** My spouse or my parent's spouse is deceased.**1.d.** I or my parent entered the marriage in good faith, but the marriage was terminated through divorce or annulment.**1.e.** I entered the marriage in good faith, and, during the marriage, I was battered, or was the subject of extreme cruelty, by my U.S. citizen or permanent resident spouse.**1.f.** My parent entered the marriage in good faith and, during the marriage, I was battered, or was subjected to extreme cruelty, by my parent's U.S. citizen or permanent resident spouse or by my conditional resident parent.**1.g.** The termination of my status and removal from the United States would result in an extreme hardship. | **[Page 2]****Part 3. Basis for Petition*****Joint Filing***My conditional residence is based on my marriage or my parent's marriage to a U.S. citizen or lawful permanent resident, and I am filing this joint petition together with (Select **only** **one** box):**1.a.** My spouse.**1.b.** [No change]**OR** (Select **all** applicable boxes in the next section.)**[Page 3]*****Waiver or Individual Filing Request***My conditional residence is based on my marriage or my parent's marriage to a U.S. citizen or lawful permanent resident, I am unable to file a joint petition with my spouse or my parent's spouse, because:**1.c.** My spouse is deceased.**1.d.** My marriage was entered in good faith, but the marriage was terminated through divorce or annulment.**1.e.** I entered the marriage in good faith, and, during the marriage, I was battered, or was the subject of extreme cruelty, by my U.S. citizen or lawful permanent resident spouse.**1.f.** My parent entered the marriage in good faith, and, during the marriage, I was battered, or was subjected to extreme cruelty, by my parent’s U.S. citizen or lawful permanent resident spouse or by my conditional resident parent.[No change] |
| **Page 3,** **Part 3. Information About the Petitioning Spouse or, If Filing as a Child Separately, Information About the U.S. Citizen or LPR Stepparent Through Whom You Gained Your Conditional Residence** | **Part 3. Information About the Petitioning Spouse or, If Filing as a Child Separately, Information About the U.S. Citizen or LPR Stepparent Through Whom You Gained Your Conditional Residence****Relationship****1.a.** Spouse or Former Spouse**1.b.** Parent’s Spouse or Former Spouse**2.a.** Family Name *(Last Name)***2.b.** Given Name *(First Name)***2.c.** Middle Name**3.** Date of Birth *(mm/dd/yyyy)***4.** U.S. Social Security Number *(if any)***5.** Alien Registration Number *(A-Number)***6.a.** Street Number and Name**6.b.** Apt. Ste. Flr. [ ]**6.c.** City or Town**6.d.** State**6.e.** Zip Code**6.f.** Postal Code**6.g.** Province**6.h.** Country | **[Page 3]****Part 4. Information About the U.S. Citizen or Lawful Permanent Resident Spouse. If Filing as a Child Separately, Information About the U.S. Citizen or Lawful Permanent Resident Stepparent Through Whom You Gained Your Conditional Residence.**[No change- italics removed]***Other Information***[No change- italics removed]**5.** A-Number (if any)***Physical Address*****6.a.** Street Number and Name**6.b.** Apt. Ste. Flr.**6.c.** City or Town**6.d.** State**6.e.** ZIP Code**6.f.** Province **6.g.** Postal Code**6.h.** Country |
| **Pages 3-4,** **Part 4. Information About Your Children** | **Part 4. Information About Your Children**List All Your Children (Attach other sheets if necessary).**Child 1****1.a.** Family Name (Last Name)**1.b.** Given Name (First Name)**1.c.** Middle Name**2.** Date of Birth *(mm/dd/yyyy)***3.** Alien Registration Number *(A-Number)***5.** Is child living with you? **6.** Is child applying with you? **4.a.** Street Number and Name**4.b.** Apt. Ste. Flr. [ ]**4.c.** City or Town**4.d.** State or Province**4.e.** Zip Code or Postal Code**4.f.** Country**Child 2****7.a.** Family Name (Last Name)**7.b.** Given Name (First Name)**7.c.** Middle Name**7.** Date of Birth *(mm/dd/yyyy)***9.** Alien Registration Number *(A-Number)***11.** Is child living with you? **12.** Is child applying with you? **10.a.** Street Number and Name**10.b.** Apt. Ste. Flr. [ ]**10.c.** City or Town**10.d.** State or Province**10.e.** Zip Code or Postal Code**10.f.** Country**Child 3****13.a.** Family Name (Last Name)**13.b.** Given Name (First Name)**13.c.** Middle Name**14.** Date of Birth *(mm/dd/yyyy)***15.** Alien Registration Number *(A-Number)***17.** Is child living with you? **18.** Is child applying with you? **[Page 4]****16.a.** Street Number and Name**16.b.** Apt. Ste. Flr. [ ]**16.c.** City or Town**16.d.** State or Province**16.e.** Zip Code or Postal Code**16.f.** Country**Child 4****19.a.** Family Name (Last Name)**19.b.** Given Name (First Name)**19.c.** Middle Name**20.** Date of Birth *(mm/dd/yyyy)***21.** Alien Registration Number *(A-Number)***23.** Is child living with you? **23.** Is child applying with you? **22.a.** Street Number and Name**22.b.** Apt. Ste. Flr. [ ]**22.c.** City or Town**22.d.** State or Province**22.e.** Zip Code or Postal Code**22.f.** Country**Child 5****25.a.** Family Name (Last Name)**25.b.** Given Name (First Name)**25.c.** Middle Name**26.** Date of Birth *(mm/dd/yyyy)***27.** Alien Registration Number *(A-Number)***29.** Is child living with you? **30.** Is child applying with you? **28.a.** Street Number and Name**28.b.** Apt. Ste. Flr. [ ]**28.c.** City or Town**28.d.** State or Province**28.e.** Zip Code or Postal Code**28.f.** Country | **[Page 3]****Part 5. Information About Your Children**Provide information on all of your children. If you need extra space to complete this section, use the space provided in **Part 11. Additional Information**.**Child 1**[No change- remove italics]**3.** A-Number (if any)**4.** Is this child living with you? **5.** Is this child applying with you? ***Physical Address*****6.a.** Street Number and Name**6.b.** Apt. Ste. Flr. [ ]**6.c.** City or Town**6.d.** State **6.e.** ZIP Code**6.f.** Province **6.g.** Postal Code**6.h.** Country**[Page 4]**[No change- remove italics]**8.** Date of Birth (mm/dd/yyyy)**9.** A-Number (if any)**10.** Is this child living with you? **11.** Is this child applying with you? ***Physical Address*****12.a.** Street Number and Name**12.b.** Apt. Ste. Flr. [ ]**12.c.** City or Town**12.d.** State **12.e.** ZIP Code**12.f.** Province **12.g.** Postal Code**12.h.** Country[No change-remove italics]**15.** A-Number (if any)**16.** Is this child living with you? **17.** Is this child applying with you? ***Physical Address*****18.a.** Street Number and Name**18.b.** Apt. Ste. Flr. [ ]**18.c.** City or Town**18.d.** State **18.e.** ZIP Code**18.f.** Province **18.g.** Postal Code**18.h.** Country[No change]**20.** Date of Birth (mm/dd/yyyy)**21.** A-Number (if any)**22.** Is this child living with you? **23.** Is this child applying with you? ***Physical Address*****24.a.** Street Number and Name**24.b.** Apt. Ste. Flr. [ ]**24.c.** City or Town**24.d.** State **24.e.** ZIP Code**24.f.** Province **24.g.** Postal Code**24.h.** Country**[Page 5]**[No change]**26.** Date of Birth (mm/dd/yyyy)**27.** A-Number (if any)**28.** Is this child living with you? **29.** Is this child applying with you? ***Physical Address*****30.a.** Street Number and Name**30.b.** Apt. Ste. Flr. [ ]**30.c.** City or Town**30.d.** State **30.e.** ZIP Code**30.f.** Province **30.g.** Postal Code**30.h.** Country |
| **Pages 4-5,** **Part 5. Accommodations for Individuals With Disabilities and Impairments** *(Read the information in the instructions before completing this section.)* | **[Page 4]****Part 5. Accommodations for Individuals With Disabilities and Impairments** *(Read the information in the instructions before completing this section.)***I am requesting an accommodation:****1.** Because of my disability(ies) and/or impairment(s). **2.** For my spouse because of his or her disability(ies) and/or impairment(s). **3.** For my included child(ren) because of his or her (their) disability(ies) and/or impairment(s). If you answered "Yes," check any applicable box. Provide information on the disability(ies) and/or impairment(s) for each person:**4.a.** Deaf or hard of hearing and request the following accommodation(s) (if requesting a sign-language interpreter, indicate which language (e.g., American Sign Language)):**4.b.** Blind or sight-impaired and request the following accommodation(s):**[Page 5]****4.c.** Other type of disability(ies) and/or impairment(s) (describe the nature of the disability(ies) and/or impairment(s) and accommodation(s) being requested): | **[Page 5]****Part 6. Accommodations for Individuals With Disabilities and/or Impairments** **NOTE:** Read the information in the Form I-751 instructions before completing this part.**1.** Are you requesting an accommodation because of your disabilities and/or impairments? **2.** Are you requesting an accommodation because of your spouse’s disabilities and/or impairments? **3.** Are you requesting an accommodation because of your included children’s disabilities and/or impairments? If you answered “Yes” to **Item Numbers 1. - 3.**, select any applicable box for **Item Numbers 4.a. - 4.c.** Provide information on the disabilities and/or impairments for each person.**4.a.** I am deaf or hard of hearing and request the following accommodation. (If you are requesting a sign-language interpreter, indicate for which language (for example, American Sign Language).): **4.b.** I am blind or have low vision and request the following accommodation: **4.c.** I have another type of disability and/or impairment. (Describe the nature of your disability and/or impairment and the accommodation you are requesting.):  |
| **Page 5,** **Part 6. Signature** *(Read the information on penalties in the instructions before completing this section. If you checked Block**1.a. in Part 2, your spouse must also sign below. Signature of a conditional resident child under the age of 14 is not required; a parent may sign for the child).* | **[Page 5]****Part 6. Signature *(****Read the information on penalties in the instructions before completing this section. If you checked Block**1.a. in Part 2, your spouse must also sign below. Signature of a conditional resident child under the age of 14 is not required; a parent may sign for the child).*I certify, under penalty of perjury under the laws of the United States of America, that this petition and the evidence submitted with it is all true and correct. If conditional residence was based on a marriage, I further certify that the marriage was entered in accordance with the laws of the place where the marriage took place and was not for the purpose of procuring an immigration benefit. I also authorize the release of any information from my records that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit sought.***Signature of Conditional Resident*** **1.a.** Signature of Conditional Resident**1.b.** Printed Name of Conditional Resident**2.** Date of Signature *(mm/dd/yyyy)***NOTE**: If you do not completely fill out this form or fail to submit any required documents listed in the instructions, you may not be found eligible for the requested benefit and this petition may be denied.  | **[Page 5]****Part 7. Petitioner’s Statement, Contact Information, Acknowledgement of Appointment at USCIS Application Support Center, Certification, and Signature****NOTE:** Read the information on penalties in the **Penalties** section of the Form I-751 Instructions before completing this part. **NOTE:** If you selected **Box 1.a.** in **Part 3**., your spouse must also read and sign the petition in **Part 8**. Signature of a conditional resident child under 14 years of age is not required; a parent may sign for a child.***Petitioner’s Statement*** **NOTE:** Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.****1.a.** I can read and understand English, and have read and understand every question and instruction on this petition, as well as my answer to every question. I have read and understand the **Acknowledgement of Appointment at USCIS Application Support Center**.**[Page 6]****1.b.** The interpreter named in **Part 9.** has also read to me every question and instruction on this petition, as well as my answer to every question, in [Fillable Field], a language in which I am fluent. I understand every question and instruction on this petition as translated to me by my interpreter, and have provided complete, true, and correct responses in the language indicated above. The interpreter named in **Part 9.** has also read the **Acknowledgement of Appointment at USCIS Application Support Center** to me, in the language in which I am fluent, and I understand this Application Support Center (ASC) Acknowledgement as read to me by my interpreter. **2.** I have requested the services of and consented to [Fillable Field], who is is not an attorney or accredited representative, preparing this petition for me. This person who assisted me in preparing my petition has reviewed the **Acknowledgement of Appointment at USCIS Application Support Center** with me, and I understand the ASC Acknowledgement.***Petitioner’s Contact Information*** **3.** Petitioner’s Daytime Telephone Number **4.** Petitioner’s Mobile Telephone Number (if any)**5.** Petitioner’s Email Address (if any)***Acknowledgement of Appointment at USCIS Application Support Center*** I, [Auto-populate Field with Petitioner’s Full Name], understand that the purpose of a USCIS ASC appointment is for me to provide my fingerprints, photograph, and/or signature and to re-affirm that all of the information in my petition is complete, true, and correct and was provided by me. I understand that I will sign my name to the following declaration which USCIS will display to me at the time I provide my fingerprints, photograph, and/or signature during my ASC appointment.***By signing here, I declare under penalty of perjury that I have reviewed and understand my application, petition, or request as identified by the receipt number displayed on the screen above, and all supporting documents, applications, petitions, or requests filed with my application, petition, or request that I (or my attorney or accredited representative) filed with USCIS, and that all of the information in these materials is complete, true, and correct.*** If conditional residence was based on a marriage, I further certify that the marriage was entered into in accordance with the laws of the place where the marriage took place and was not for the purpose of procuring an immigration benefit. I also understand that when I sign my name, provide my fingerprints, and am photographed at the USCIS ASC, I will be re-affirming that I willingly submit this petition; I have reviewed the contents of this petition; all of the information in my petition and all supporting documents submitted with my petition were provided by me and are complete, true, and correct; and if I was assisted in completing this petition, the person assisting me also reviewed this **Acknowledgement of Appointment at USCIS Application Support Center** with me. ***Petitioner’s Certification***Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.I furthermore authorize release of information contained in this petition, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.I certify under penalty of perjury, that the information in my petition, my responses to each question, and any document submitted with my petition were provided by me and are complete, true, and correct. ***Petitioner’s Signature*** **6.a.** Petitioner’s Signature[delete]**6.b.** Date of Signature (mm/dd/yyyy)**NOTE TO ALL PETITIONERS:** If you do not completely fill out this petition or fail to submit required documents listed in the Instructions, USCIS may deny your petition.**NOTE:** If you are filing based on claims of having been battered or subjected to extreme cruelty waiver or individual filing, you are not required to have the spouse’s or individual listed in **Part 4’s** signature. |
| **New** | **[Page 5, Part 6. Signature]*****Signature of Spouse or Individual Listed in Part 3 (if applicable)*****3.a.** Signature of Spouse **3.b.** Printed Name of Spouse**4.** Date of Signature *(mm/dd/yyyy)* | **[Page 7]****Part 8. Spouse’s or Individual Listed in Part 4.’s Statement, Contact Information, Acknowledgement of Appointment at USCIS Application Support Center, Certification, and Signature** (if applicable)Provide the following information about the spouse or individual listed in **Part 4.****NOTE:**  Read the information on penalties in the **Penalties** section of the Form I-751 Instructions before completing this part. ***Spouse’s or Individual’s Statement*** **NOTE:** Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.****1.a.** I can read and understand English, and have read and understand every question and instruction on this petition, as well as the petitioner’s answer to every question**.** I have read and understand the **Acknowledgement of Appointment at USCIS Application Support Center**.**1.b.** The interpreter named in **Part 9.** has also read to me every question and instruction on this petition, as well as the petitioner’s answer to every question, in [Fillable Field], a language in which I am fluent. I understand every question and instruction on this petition as translated to me by my interpreter, and have provided complete, true, and correct responses in the language indicated above. The interpreter named in **Part 9.** has also read the **Acknowledgement of Appointment at USCIS Application Support Center** to me, in the language in which I am fluent, and I understand this Application Support Center (ASC) Acknowledgement as read to me by my interpreter. **2.** I have requested the services of and consented to [Fillable Field], who is is not an attorney or accredited representative, preparing this petition for me. This person who assisted me in preparing my petition has reviewed the **Acknowledgement of Appointment at USCIS Application Support Center** with me, and I understand the ASC Acknowledgement.***Spouse’s or Individual’s***  ***Contact Information*** **3.** Spouse’s or Individual’s Daytime Telephone Number **4.** Spouse’s or Individual’s Mobile Telephone (if any)**5.** Spouse’s or Individual’s Email Address (if any)***Acknowledgement of Appointment at USCIS Application Support Center*** I, [Auto-populate Field with Spouse’s or Individual’s Full Name], understand that the purpose of a USCIS ASC appointment is for me to provide my fingerprints, photograph, and/or signature and to re-affirm that all of the information in my petition is complete, true, and correct and was provided by me. I understand that I will sign my name to the following declaration which USCIS will display to me at the time I provide my fingerprints, photograph, and/or signature during my ASC appointment.***By signing here, I declare under penalty of perjury that I have reviewed and understand my application, petition, or request as identified by the receipt number displayed on the screen above, and all supporting documents, applications, petitions, or requests filed with my application, petition, or request that I (or my attorney or accredited representative) filed with USCIS, and that all of the information in these materials is complete, true, and correct.*** I also understand that when I sign my name, provide my fingerprints, and am photographed at the USCIS ASC, I will be re-affirming that I willingly submit this petition; I have reviewed the contents of this petition; all of the information in my petition and all supporting documents submitted with my petition were provided by me and are complete, true, and correct; and if I was assisted in completing this petition, the person assisting me also reviewed this **Acknowledgement of Appointment at USCIS Application Support Center** with me. ***Spouse’s or Individual’s*** ***Certification***Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.I furthermore authorize release of information contained in this petition, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.I certify under penalty of perjury, that the information in my petition, my responses to each question, and any document submitted with my petition were provided by me and are complete, true, and correct. ***Spouse’s or Individual’s***  ***Signature*** **6.a.** Spouse’s or Individual’s Signature[delete]**6.b.** Date of Signature (mm/dd/yyyy)**NOTE TO ALL SPOUSES OR INDIVIDUALS:** If you do not completely fill out this petition or fail to submit required documents listed in the instructions, USCIS may deny your petition. |
| **New** |  | **[Page 8]****Part 9. Interpreter’s Contact Information**, **Certification, and Signature**Provide the following information about the interpreter. ***Interpreter’s Full Name*** **1.a.** Interpreter's Family Name (Last Name)**1.b.** Interpreter's Given Name (First Name)**2.** Interpreter's Business or Organization Name (if any)***Interpreter’s Mailing Address*** **3.a.** Street Number and Name**3.b.** Apt. Ste. Flr. **3.c.** City or Town**3.d.** State**3.e.** ZIP Code**3.f.** Province**3.g.** Postal Code**3.h.** Country***Interpreter’s Contact Information*** **4.** Interpreter's Daytime Telephone Number**5.** Interpreter’s Email Address (if any)***Interpreter’s Certification*** **I certify that:** I am fluent in English and [Fillable Field], which is the same language provided in **Part 7.**, **Item Number 1.b.**;I have read to this petitioner every question and instruction on this petition, as well as the answer to every question, in the language provided in **Part 7.**, **Item Number 1.b.**; andI have read the **Acknowledgement of Appointment at USCIS Application Support Center** to the petitioner in the same language provided in **Part 7.**, **Item Number 1.b.** The petitioner has informed me that he or she understands every instruction and question on the petition, as well as the answer to every question, and the petitioner verified the accuracy of every answer; andThe petitioner has also informed me that he or she understands the ASC Acknowledgement and that by appearing for a USCIS ASC biometric services appointment and providing his or her fingerprints, photograph, and/or signature, he or she is re-affirming that the contents of this petition and all supporting documentation are complete, true, and correct. ***Interpreter’s Signature*** **6.a.** Interpreter's Signature **6.b.** Date of Signature (mm/dd/yyyy) |
| **Page 5,** **Part 7. Signature and Contact Information of Person Preparing Form, If Other Than Above** | **[Page 5]****Part 7. Signature and Contact Information of Person Preparing Form, If Other Than Above*****Preparer's Full Name*****3.a.** Preparer’s Family Name *(Last Name)***3.b.** Preparer’s Given Name *(First Name)***4.** Preparer’s Business or Organization Name *(if any)****Preparer’s Mailing Address*** **5.a.** Street Number and Name**5.b.** Apt. Ste. Flr. **5.c.** City or Town **5.d.** State**5.e.** ZiP Code***Preparer’s Contact Information*****6.** Preparer’s Daytime Telephone Number **7.** Preparer’s Email Address *(if any)*I declare that I prepared this petition at the request of the above person, and it is based on all information of which I have knowledge.**1.** Signature of Preparer**2.** Date of Signature *(mm/dd/yyyy)* | **[Page 9]****Part 10. Contact Information, Statement, Certification, and Signature of the Person Preparing this Petition, If Other Than the Petitioner** Provide the following information about the preparer.***Preparer’s Full Name*** **1.a.** Preparer’s Family Name (Last Name)**1.b.** Preparer’s Given Name (First Name)**2.** Preparer’s Business or Organization Name (if any)***Preparer’s Mailing Address*** **3.a.** Street Number and Name**3.b.** Apt. Ste. Flr. **3.c.** City or Town **3.d.** State**3.e.** ZIP Code**3.f.** Province**3.g.** Postal Code**3.h.** Country***Preparer’s Contact Information*****4.** Preparer’s Daytime Telephone Number **5.** Preparer’s Fax Number **6.** Preparer’s Email Address (if any)***Preparer’s Statement*** **7.a.** I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner and with the petitioner’s consent.**7.b.** I am an attorney or accredited representative and my representation of the petitioner in this case extends does not extend beyond the preparation of this petition.**NOTE:** If you are an attorney or accredited representative whose representation extends beyond preparation of this petition, you must submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this petition.***Preparer’s Certification*** By my signature, I certify, swear, or affirm, under penalty of perjury, that I prepared this petition on behalf of, at the request of, and with the express consent of the petitioner. I completed this petition based only on responses the petitioner provided to me. After completing the petition, I reviewed it and all of the petitioner’s responses with the petitioner, who agreed with every answer on the petition. If the petitioner supplied additional information concerning a question on the petition, I recorded it on the petition. I have also read the **Acknowledgement of Appointment at USCIS Application Support Center** to the petitioner and the petitioner has informed me that he or she understands the ASC Acknowledgement. ***Preparer’s Signature*** **8.a.** Preparer's Signature **8.b.** Date of Signature (mm/dd/yyyy) |
| **New** |  | **[Page 10]****Part 11. Additional Information**If you need extra space to provide any additional information within this petition, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this petition or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.**1.a.** Family Name (Last Name) [Auto-populated field]**1.b.** Given Name (First Name) [Auto-populated field]**1.c.** Middle Name [Auto-populated field]**2.** A-Number (if any) [Auto-populated field]**3.a.** Page Number**3.b.** Part Number**3.c.** Item Number**3.d.** [Fillable field]**4.a.** Page Number**4.b.** Part Number **4.c.** Item Number**4.d.** [Fillable field]**5.a.** Page Number **5.b.** Part Number **5.c.** Item Number**5.d.** [Fillable field]**6.a.** Page Number **6.b.** Part Number **6.c.** Item Number**6.d.** [Fillable field]**7.a.** Page Number **7.b.** Part Number **7.c.** Item Number**7.d.** [Fillable field] |